

IN THE MATTER OF  
THE LICENSE OF  
SUDHEER KAZA, M.D.

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BEFORE THE  
TEXAS STATE BOARD  
OF MEDICAL EXAMINERS

ORDER

On this the 15 day of October, 1999, came on to be heard before the Texas State Board of Medical Examiners ("the Board" or "the Texas Board"), duly in session the matter of the license of Sudheer Kaza, M.D. ("Respondent"). On September 22, 1999, Respondent appeared in person, without counsel, before representatives of the Board to report on and address issues related to Respondent's compliance with the terms and condition of an Order entered on August 22, 1998, pertaining to Respondent's Texas medical license H-9656 and to petition the Board to terminate the August 22, 1998 Order.

The Board was represented at Respondent's appearance by Janet Tornelli-Mitchell, M.D. and Nancy M. Seliger, both of whom are members of the Board. Upon recommendation of the Board's representatives, and with the consent and request of Respondent, the Board makes the following findings of fact and enters this Order as set forth herein:

FINDINGS OF FACT

A. On August 22, 1998, the Board entered an Agreed Order, which restricted Respondent's medical license for three (3) years, under certain terms and conditions, based on the following Findings of Fact:

1. Respondent, Sudheer Kaza, M.D., holds Texas medical license H-9656.
2. The Board has jurisdiction over the subject matter and Respondent. Respondent received all notice which may be required by law and by the rules of the Board. All jurisdictional requirements have been satisfied.
3. Respondent has been licensed to practice in Texas since August 23, 1991.
4. Respondent is engaged in the practice of psychiatry in the Beaumont, Texas, area.
5. In April 1995, Respondent began treating an adult male patient for depression and addiction.
6. Respondent treatment of the adult male patient consisted of patient office visits initially two to three visits weekly, and prescribing anti-anxiety and anti-depression medication, and then tapering to weekly and bi-weekly visits as the patient progressed.
7. This method of treatment continued until November, 1995, when the patient was a no show for two visits in December and one in January, 1996, and was not seen again.
8. In July, 1995, Respondent was informed by the patient's wife that the patient would become suicidal because of financial hardship.
9. Respondent documented that Respondent believed that the patient might become suicidal.
10. Instead of appropriately addressing the patient's suicidal mental state through medically recognized intervention, Respondent loaned the patient and his wife several thousand dollars in order to assist the family. The loan was secured by a promissory note between Respondent and the patient, and the patient's wife who had solicited the loan.
11. Despite entering into a business relationship with the patient and his wife, Respondent failed to terminate the physician-patient relationship.
12. Respondent referred the patient to another physician and the patient refused because of the progress he was making in treatment with Respondent.
13. In January, 1996, a dispute arose between Respondent and the patient's wife as to repayment of the business transaction, and Respondent last saw the patient in November, 1996.

14. The patient or his wife attempted to subsequently obtain medications from a pharmacy in Respondent's name.
15. The patient credits Respondent with curing his addiction.
16. After the loan was defaulted, Respondent learned that the patient's wife had a history of arrests for illegal financial transactions.
17. In Respondent's medical care of the patient, Respondent failed to do the following:
  - failed to make adequate medical entries into the patient's record
  - failed to maintain proper physician-patient boundaries by making a loan to the patient
18. In 1993, Respondent began treating an adult female patient who presented with complaints of feeling depressed. Respondent diagnosed her as suffering from major depression during the initial patient visit.
19. From the initial patient visit through August 1996, Respondent treated the patient on a regular and continuous basis.
20. Respondent's treatment of the adult female patient consisted primarily of prescribing Schedule IV controlled substances, such as Halcion and Xanax for anxiety and Darvocet and Schedule III controlled substances such as Vicodin for multiple somatic complaints, including headaches, joint pains, and body aches following explanation of leaking breast implants. Respondent prescribed these drugs without adequately documenting the medical rationale to support such prescribing.
21. Respondent failed to document in the patient's medical record all the drugs which he prescribed for her.
22. In November, 1994, during the course of Respondent's physician-patient relationship with the adult female patient, Respondent helped the patient to obtain a loan.
23. After entering into the business relationship, Respondent failed to terminate the physician-patient relationship and failed to refer the adult female patient to another physician. Instead, Respondent continued to treat the adult female patient.

24. The patients referenced in the above findings of fact are not related in any manner. The events involving the adult male patient and adult female patient, respectively, were separate patient cases involving separate and unrelated facts.

25. Separate and apart from his treatment of the aforementioned patients, Respondent wrote prescriptions for controlled substances such as Dexedrine, Phentermine and Restoril without proper documentation.

B. Based on information available on September 22, 1999, and because Respondent has only completed one (1) year of the required three (3) year period of restriction, the Board's representatives recommend that Respondent's petition to terminate the August 22, 1998 Order be denied. However, based on available information and upon Respondent's compliance with the terms and conditions of the August 22, 1998 Order, the Board's representatives recommend that the Order be modified to require one appearance per year.

#### ORDER

Based on available information, the above Findings of Fact, and the recommendation of the Board's representatives, the Board ORDERS that Respondent's petition to terminate the August 22, 1998 Order is DENIED. However, based on available information, the above Findings of Fact, and the recommendation of the Board's representatives, the Board further ORDERS that the August 22, 1998 Order is hereby MODIFIED as follows:

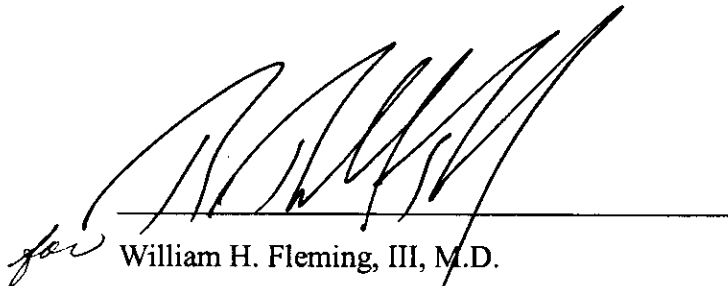
1. Paragraph seventeen (17) on page seven (7) of the August 22, 1998 Order is hereby modified as follows:

"17. Respondent shall personally appear before a panel of Board representatives, at least one (1) time each year that Respondent is under the terms and conditions of this Order. Such appearances shall be for the purpose of reporting on and addressing issues related to Respondent's compliance with the terms and conditions of this Order."

All other terms and conditions of the August 22, 1998 Order remain in full force and effect until superseded by a subsequent Order of the Board.

THIS IS A PUBLIC RECORD.

Signed and entered on this the 15 day of October, 1999.

A large, stylized handwritten signature in black ink, written over a horizontal line. The signature is cursive and appears to read 'W. H. Fleming, III'.

for William H. Fleming, III, M.D.  
President, Texas State Board of  
Medical Examiners